

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

True Companies Responsible Government Committee

ADDRESS (number and street)

455 North Poplar St.

P.O. BOX 2360

☐ Check if different than previously reported. (ACC)

CASPER

WY

82602

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00034728

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☒ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
08 02 2012

through

M M M / D D D / Y Y Y Y Y Y  
09 30 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ms Cherie Miller

Signature of Treasurer

Ms Cherie Miller

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
10 15 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

True Companies Responsible Government Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
08 / 02 / 2012 To: M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2012</span>		5169.85
(b) Cash on Hand at Beginning of Reporting Period.....	7479.85	
(c) Total Receipts (from Line 19) .....	7878.00	10188.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	15357.85	15357.85
7. Total Disbursements (from Line 31) .....	15150.00	15150.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	207.85	207.85
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

True Companies Responsible Government Committee

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
08		02		2012

To:

M M	/	D D	/	Y Y Y Y Y Y
09		30		2012

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

6190.00

6700.00

(ii) Unitemized .....

1688.00

3488.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

7878.00

10188.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

7878.00

10188.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

7878.00

10188.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

7878.00

10188.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14250.00	14250.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	900.00	900.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15150.00	15150.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15150.00	15150.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7878.00	10188.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7878.00	10188.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 18

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**True Companies Responsible Government Committee**

Full Name (Last, First, Middle Initial)

## **A. Mr. Roger Barton**

Mailing Address 1019 Surrey Ct.

City State Zip Code  
Casper WY 82609

FEC ID number of contributing  
federal political committee.

C

Name of Employer

True Oil LLC

Occupation

Chief Geologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 31 / 2012

**Transaction ID : SA11AI.5986**

Amount of Each Receipt this Period

120.00

Payroll deduction

Full Name (Last, First, Middle Initial)

## **B. Mr. Kevin Bowen**

Mailing Address 1337 South Jefferson St.

City State Zip Code  
Casper WY 82601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Equitable Oil Purchasing Co.

Occupation

Sales Rep.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 31 / 2012

**Transaction ID : SA11AI.5973**

Amount of Each Receipt this Period

150.00

Payroll deduction

Full Name (Last, First, Middle Initial)

## **C. Mr. Marlin Hanson**

Mailing Address 7101 Third Ave. East

City State Zip Code  
Williston ND 58801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Black Hills Trucking, Inc.

Occupation

Terminal Superintendent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 31 / 2012

**Transaction ID : SA11AI.5979**

Amount of Each Receipt this Period

90.00

Payroll deduction

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

360.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**True Companies Responsible Government Committee**

Full Name (Last, First, Middle Initial)

**A. Mr. Bob Selby**

Mailing Address Post Office Box 283

City  
Evansville

State Zip Code  
WY 82636

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Toolpushers Supply Co.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 05 / 2012

**Transaction ID : SA11AI.5959**

Amount of Each Receipt this Period

500.00

Contribution via check

Full Name (Last, First, Middle Initial)

**B. Mr. David L. True**

Mailing Address 5440 South Poplar Street

City  
Casper

State Zip Code  
WY 82601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
True Drilling LLC

Occupation  
Member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 31 / 2012

**Transaction ID : SA11AI.5963**

Amount of Each Receipt this Period

2500.00

Contribution via check

Full Name (Last, First, Middle Initial)

**C. Mr. Hank True**

Mailing Address P. O. Box 970

City  
Glenrock

State Zip Code  
WY 82637

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eighty-Eight Oil LLC

Occupation  
Member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 31 / 2012

**Transaction ID : SA11AI.5968**

Amount of Each Receipt this Period

2500.00

Contribution via check

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**True Companies Responsible Government Committee**

Full Name (Last, First, Middle Initial)

**A. Ms JoAnn True**

Mailing Address 4075 Placid Dr.

City State Zip Code  
Casper WY 82604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

True Oil LLC

Occupation

Geologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

08 / 31 / 2012

Transaction ID : SA11AI.5971

Amount of Each Receipt this Period

120.00

Payroll deduction

Full Name (Last, First, Middle Initial)

**B. Mr. Scott Wells**

Mailing Address 653 Grant Ave.

City State Zip Code  
Casper WY 82601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

True Oil LLC

Occupation

Internal Auditor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

08 / 31 / 2012

Transaction ID : SA11AI.5989

Amount of Each Receipt this Period

90.00

Payroll deduction

Full Name (Last, First, Middle Initial)

**C. Mr. Ken White Jr.**

Mailing Address 1117 South Oakcrest

City State Zip Code  
Casper WY 82601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

True Oil LLC

Occupation

Treasurer & Human Resources Mgr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

08 / 31 / 2012

Transaction ID : SA11AI.5972

Amount of Each Receipt this Period

120.00

Payroll deduction

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

330.00

6190.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**True Companies Responsible Government Committee**

Full Name (Last, First, Middle Initial)

**A. GEORGE ALLEN**

Mailing Address 2819 NORTH PARHAM ROAD

City	State	Zip Code
RICHMOND	VA	23241

Purpose of Disbursement  
Campaign contribution

Candidate Name

**GEORGE ALLEN**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: VA	District: 00

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

011

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2012

**Transaction ID : SB23.6043**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. DANIEL J BENISHEK**

Mailing Address PO Box 108

City	State	Zip Code
Gladstone	MI	48736

Purpose of Disbursement  
Campaign contribution

Candidate Name

**DANIEL J BENISHEK**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State: MI	District: 01

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

011

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2012

**Transaction ID : SB23.6012**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. RICHARD A BERG**

Mailing Address PO BOX 9394

City	State	Zip Code
FARGO	ND	58106

Purpose of Disbursement  
Campaign contribution

Candidate Name

**RICHARD A BERG**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: ND	District: 00

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

011

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2012

**Transaction ID : SB23.6034**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2250.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**True Companies Responsible Government Committee**

Full Name (Last, First, Middle Initial)

**A. JUDY BIGGERT**

Mailing Address P.O. BOX 4198

City  
NAPERVILLEState  
ILZip Code  
60567Purpose of Disbursement  
Campaign contribution

Candidate Name

**JUDY BIGGERT**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2012

**Transaction ID : SB23.6006**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**B. BRIAN PHILLIP BILBRAY**

Mailing Address 3298 GOVERNOR DRIVE # 1039

City  
SAN DIEGOState  
CAZip Code  
92192Purpose of Disbursement  
Campaign contribution

Candidate Name

**BRIAN PHILLIP BILBRAY**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 52

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2012

**Transaction ID : SB23.5994**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. SCOTT P BROWN**

Mailing Address 70 HAYDEN WOODS

City  
WRENTHAMState  
MAZip Code  
02093Purpose of Disbursement  
Campaign contribution

Candidate Name

**SCOTT P BROWN**Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MA District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2012

**Transaction ID : SB23.6030**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00
---------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**True Companies Responsible Government Committee**

Full Name (Last, First, Middle Initial)

**A. FRANCISCO RAUL QUICO CANSECO**

Mailing Address 10004 WURZBACH ROAD #366

City	State	Zip Code
SAN ANTONIO	TX	78230

Purpose of Disbursement  
Campaign contribution

Candidate Name

**CANSECO FOR CONGRESS**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

**Transaction ID : SB23.6024**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**B. MICHAEL COFFMAN**

Mailing Address 9249 SOUTH BROADWAY #200-501

City	State	Zip Code
HIGHLANDS RANCH	CO	80129

Purpose of Disbursement  
Campaign contribution

Candidate Name

**MICHAEL COFFMAN**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

**Transaction ID : SB23.5996**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. RAYMOND J MR. CRAVAACK**

Mailing Address PO BOX 4182

City	State	Zip Code
SAINT PAUL	MN	55101

Purpose of Disbursement  
Campaign contribution

Candidate Name

**RAYMOND J MR. CRAVAACK**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

**Transaction ID : SB23.6014**

Amount of Each Disbursement this Period

250.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

750.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**True Companies Responsible Government Committee**

Full Name (Last, First, Middle Initial)

**A. JEFF FLAKE**

Mailing Address 4222 E MCLELLAN CIRCLE

City MESA	State AZ	Zip Code 85205
--------------	-------------	-------------------

Purpose of Disbursement  
Campaign contribution

Candidate Name

**JEFF FLAKE**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

**Transaction ID : SB23.6026**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER P GIBSON**

Mailing Address PO BOX 543

City KINDERHOOK	State NY	Zip Code 12106
--------------------	-------------	-------------------

Purpose of Disbursement  
Campaign contribution

Candidate Name

**CHRISTOPHER P GIBSON**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

**Transaction ID : SB23.6020**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. FRANK GUINTA**

Mailing Address PO BOX 877

City MANCHESTER	State NH	Zip Code 03105
--------------------	-------------	-------------------

Purpose of Disbursement  
Campaign contribution

Candidate Name

**FRANK GUINTA**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NH District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

**Transaction ID : SB23.6016**

Amount of Each Disbursement this Period

250.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**True Companies Responsible Government Committee**

Full Name (Last, First, Middle Initial)

**A. JOE HECK**

Mailing Address PO BOX 530520

City HENDERSON	State NV	Zip Code 89053
-------------------	-------------	-------------------

Purpose of Disbursement  
Campaign contribution

Candidate Name

**JOE HECK**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NV District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

**Transaction ID : SB23.6018**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**B. DEAN HELLER**

Mailing Address PO BOX 371907

City LAS VEGAS	State NV	Zip Code 89137
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Purpose of Disbursement  
Campaign contribution

Candidate Name

**DEAN HELLER**Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NV District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

**Transaction ID : SB23.6039**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. STEVE MR. KING**

Mailing Address 3897 ESTHER AVE.

City KIRON	State IA	Zip Code 51448
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Purpose of Disbursement  
Campaign contribution

Candidate Name

**STEVE MR. KING**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

**Transaction ID : SB23.6004**

Amount of Each Disbursement this Period

250.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00
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# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**True Companies Responsible Government Committee**

Full Name (Last, First, Middle Initial)

**A. THOMAS LATHAM**

Mailing Address PO BOX 8237

City State Zip Code  
**DES MOINES IA 50301**

Purpose of Disbursement  
 Campaign contribution

Candidate Name

**THOMAS LATHAM**

Office Sought: ☒ House  
☐ Senate  
☐ President  
 State: IA District: 03

Disbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
 09 21 2012

**Transaction ID : SB23.6002**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. DANIEL E. LUNGREN**

Mailing Address 2002 DISCOVERY VILLAGE LANE

City State Zip Code  
**GOLD RIVER CA 95670**

Purpose of Disbursement  
 Campaign contribution

Candidate Name

**DANIEL E. LUNGREN**

Office Sought: ☒ House  
☐ Senate  
☐ President  
 State: CA District: 07

Disbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
 09 21 2012

**Transaction ID : SB23.5992**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. JOSH MANDEL**

Mailing Address 2112 ACACIA PARK DRIVE SUITE 504

City State Zip Code  
**LYNDHURST OH 44124**

Purpose of Disbursement  
 Campaign contribution

Candidate Name

**JOSH MANDEL**

Office Sought: ☐ House  
☒ Senate  
☐ President  
 State: OH District: 00

Disbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
 09 21 2012

**Transaction ID : SB23.6041**

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**True Companies Responsible Government Committee**

Full Name (Last, First, Middle Initial)

**A. RICHARD E MOURDOCK**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

Mailing Address 10880 RIDGE KNOLL DRIVE

City	State	Zip Code
EVANSVILLE	IN	47710

**Transaction ID : SB23.6028**Purpose of Disbursement  
Campaign contribution

011

Amount of Each Disbursement this Period

1000.00
---------

Candidate Name

**RICHARD E MOURDOCK**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 00

Full Name (Last, First, Middle Initial)

**B. JASON PLUMMER**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

Mailing Address PO BOX 1272

City	State	Zip Code
O'FALLON	IL	62269

**Transaction ID : SB23.6008**Purpose of Disbursement  
Campaign contribution

011

Amount of Each Disbursement this Period

250.00
--------

Candidate Name

**JASON PLUMMER**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 12

Full Name (Last, First, Middle Initial)

**C. DENNIS RAY REHBERG**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

Mailing Address 5115 US Highway 93 South

City	State	Zip Code
Missoula	MT	59804

**Transaction ID : SB23.6032**Purpose of Disbursement  
Campaign contribution

011

Amount of Each Disbursement this Period

1000.00
---------

Candidate Name

**DENNIS RAY REHBERG**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MT District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2250.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**True Companies Responsible Government Committee**

Full Name (Last, First, Middle Initial)

**A. JAMES B RENACCI**

Mailing Address PO BOX 88

City WADSWORTH	State OH	Zip Code 44282
-------------------	-------------	-------------------

Purpose of Disbursement  
Campaign contribution

Candidate Name

**JAMES B RENACCI**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: OH	District: 16

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

011

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

**Transaction ID : SB23.6022**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**B. DAVID RIVERA**

Mailing Address P. O. BOX 520633

City MIAMI	State FL	Zip Code 33152
---------------	-------------	-------------------

Purpose of Disbursement  
Campaign contribution

Candidate Name

**DAVID RIVERA**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: FL	District: 26

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

011

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

**Transaction ID : SB23.6000**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. ROBERT T. SCHILLING**

Mailing Address 1 GOEMBEL COURT

City COLONA	State IL	Zip Code 61241
----------------	-------------	-------------------

Purpose of Disbursement  
Campaign contribution

Candidate Name

**ROBERT T. SCHILLING**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: IL	District: 17

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

011

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

**Transaction ID : SB23.6010**

Amount of Each Disbursement this Period

250.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

750.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**True Companies Responsible Government Committee**

Full Name (Last, First, Middle Initial)

**A. TOMMY G THOMPSON**

Mailing Address 1313 MANASSAS TRAIL

City MADISON	State WI	Zip Code 53718
-----------------	-------------	-------------------

Purpose of Disbursement  
Campaign contribution

Candidate Name

**TOMMY G THOMPSON**Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

**Transaction ID : SB23.6045**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. ALLEN B MR. WEST**

Mailing Address 1641 NW 107TH LANE

City PLANTATION	State FL	Zip Code 33322
--------------------	-------------	-------------------

Purpose of Disbursement  
Campaign contribution

Candidate Name

**ALLEN B MR. WEST**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

**Transaction ID : SB23.5998**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. HEATHER A WILSON**

Mailing Address 9220 GUADALUPE TRAIL NW

City ALBUQUERQUE	State NM	Zip Code 87114
---------------------	-------------	-------------------

Purpose of Disbursement  
Campaign contribution

Candidate Name

**HEATHER A WILSON**Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NM District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

**Transaction ID : SB23.6037**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2250.00
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14250.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**True Companies Responsible Government Committee**

Full Name (Last, First, Middle Initial)

**A. Rick Hill**

Mailing Address PO Box 1585

City	State	Zip Code
Helena	MT	59624

Purpose of Disbursement  
Montana gubernatorial campaign contribution

Candidate Name

**A Lot of Folks for Rick Hill**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MT District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2012

**Transaction ID : SB29.6047**

Amount of Each Disbursement this Period

600.00
--------

Full Name (Last, First, Middle Initial)

**B. Sandy Welch**

Mailing Address PO Box 1596

City	State	Zip Code
Helena	MT	59624

Purpose of Disbursement  
Superintendent of Public Instruction campaign contribution

Candidate Name

**Welch for Superintendent**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MT District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2012

**Transaction ID : SB29.6052**

Amount of Each Disbursement this Period

300.00
--------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

900.00
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900.00
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